## N44015

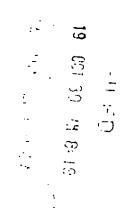
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## COVER LETTER

	Amendment Section Division of Corporations					
SUBJEC	Arthur Sawyer American Legion I					
	Name of Corpo	pration				
DOCUM	MENT NUMBER: N44075					
The encle	osed Statement of Change of Registered Office/A	gent and fee are submitted for filing.				
Please re	eturn all correspondence concerning this matter to	the following:				
	Daniel T. Dedeo					
Name of Contact Person						
Arthur Sawyer American Legion Post 28 Inc						
	Firm/Company					
5610 College Road						
Address						
Key West, FL 33040-4310						
City/State and Zip Code						
dedeo@bellsouth.net						
E-mail address: (to be used for future annual report notification)						
For furth	er information concerning this matter, please call:					
Dani	iel T. Dedeo	.305 \.797-4250				
	Name of Contact Person	T ( 305 ) 797-4250 Area Code & Daytime Telephone Number				
Enclosed	I is a \$35.00 check made payable to the Departmen	nt of State.				
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida pration organized under the laws of the State of	Florida		_
		fice or registered agent, or both, in the State of awyer American Legion Post 28 I			
	office address: 5610 Co				
z. The principal		st, FL 33040-4310			
3. The mailing a	ddress (if different):		-		
4. Date of incorp	poration/qualification: 06/2	27/1991	75		
	street address of the current timent of State: (If resigned,	nt registered agent and registered office on file we enter resigned)	ith the		
	Howard Hubbard				
	5610 College Road	d	•		
	Key West, FL 3304	10-4310	-		
6. The name and street address of the new registered agent ( (if changed):		egistered agent (if changed) and /or registered or	ffice	19 BC	
	Daniel T. Dedeo			3€	
	5610 College Road		_	æ	: :
P.O. Box NOT acceptable Key West, FL 33040-4310		·		;;	
	ess of its registered office and be identical.	nd the street address of the business office of i duly adopted by its board of directors or by an has been notified in writing of the change.			gent,
authorized by the	e board, or the corporation	Michael Werner/Post C			ar.
Signatu	re of an officer or director	Printed or typed name and til		11100	<del></del>
√ furtheNagree i	o comply with the provision	red agent and agree to act in this capacity. ns of all statutes relative to the proper and con ir with and accept the obligation of my position nerely to reflect a change in the registered offic ren notified in writing of this change.	nplete n as regi ce addre	isterea rss, I	ł
Camil T. Dedra October 28, 2019					
	nature of Registered Agent	Date			
T	ped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*